

## WATER WELL PLUGGING RECORD

Form WWC-5P

KSA 82a-1212

ID No.

MW-2R

<b>1 LOCATION OF WATER WELL:</b>		Fraction	Section Number	Township Number	Range Number																																
County: <u>Finney</u>		<u>NE 1/4 SE 1/4 SW 1/4</u>	<u>12</u>	<u>24 S</u>	<u>33 W</u>																																
Distance and direction from nearest town or city street address of well if located within city? <u>1304 Massy Ferguson Road</u>																																					
<b>2 WATER WELL OWNER:</b> <u>Garden City Coop Bulk Plant</u>																																					
<b>RR#, St. Address, Box #</b> <u>1304 Massey Ferguson Road</u>			<b>Board of Agriculture, Division of Water Resources</b>																																		
<b>City, State, ZIP Code</b> <u>Garden City, KS 67846</u>			<b>Application Number:</b>																																		
<b>3 MARK WELL'S LOCATION WITH AN 'X' IN SECTION BOX:</b>		<b>4 DEPTH OF WELL</b> <u>49</u> ft.																																			
		<b>WELL'S STATIC WATER LEVEL</b> <u>43</u> ft.																																			
		<b>WELL WAS USED AS:</b>																																			
		<table style="width:100%;"> <tr> <td>1 Domestic</td> <td>5 Public Water Supply</td> <td>9 Dewatering</td> </tr> <tr> <td>2 Irrigation</td> <td>6 Oil Field Water Supply</td> <td>10 Monitoring Well</td> </tr> <tr> <td>3 Feedlot</td> <td>7 Lawn and Garden (domestic)</td> <td>11 Injection Well</td> </tr> <tr> <td>4 Industrial</td> <td>8 Air Conditioning</td> <td>12 Other</td> </tr> </table>				1 Domestic	5 Public Water Supply	9 Dewatering	2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well	3 Feedlot	7 Lawn and Garden (domestic)	11 Injection Well	4 Industrial	8 Air Conditioning	12 Other																				
		1 Domestic	5 Public Water Supply	9 Dewatering																																	
2 Irrigation	6 Oil Field Water Supply	10 Monitoring Well																																			
3 Feedlot	7 Lawn and Garden (domestic)	11 Injection Well																																			
4 Industrial	8 Air Conditioning	12 Other																																			
Was a chemical/bacteriological sample submitted to Department? Yes <input type="checkbox"/> No <input type="checkbox"/> If yes, mo/day/yr sample was submitted _____ Water Well Disinfected: Yes <input type="checkbox"/> No <input type="checkbox"/>																																					
<b>5 TYPE OF BLANK CASING USED:</b>																																					
<table style="width:100%;"> <tr> <td>1 Steel</td> <td>3 RMP (SR)</td> <td>5 Wrought</td> <td>7 Fiberglass</td> <td>9 Other (specify below)</td> </tr> <tr> <td>2 PVC</td> <td>4 ABC</td> <td>6 Asbestos-Cement</td> <td>8 Concrete Tile</td> <td></td> </tr> </table>						1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other (specify below)	2 PVC	4 ABC	6 Asbestos-Cement	8 Concrete Tile																							
1 Steel	3 RMP (SR)	5 Wrought	7 Fiberglass	9 Other (specify below)																																	
2 PVC	4 ABC	6 Asbestos-Cement	8 Concrete Tile																																		
Blank casing diameter <u>2</u> in. Was casing pulled? Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> If yes, how much <u>3</u> feet																																					
Casing height above or below land surface _____ in.																																					
<b>6 GROUT PLUG MATERIAL:</b> 1 Neat cement 2 Cement grout <u>3</u> Bentonite 4 Other _____																																					
Grout Plug Intervals From <u>0</u> ft. to <u>49</u> ft. From _____ ft. to _____ ft. From _____ ft. to _____ ft.																																					
What is the nearest source of possible contamination:																																					
<table style="width:100%;"> <tr> <td>1 Septic tank</td> <td>6 Seepage pit</td> <td>11 Fuel storage</td> <td>16 Other (specify below)</td> </tr> <tr> <td>2 Sewer lines</td> <td>7 Pit privy</td> <td>12 Fertilizer storage</td> <td></td> </tr> <tr> <td>3 Watertight sewer lines</td> <td>8 Sewage lagoon</td> <td>13 Insecticide storage</td> <td></td> </tr> <tr> <td>4 Lateral lines</td> <td>9 Feedyard</td> <td>14 Abandoned water well</td> <td></td> </tr> <tr> <td>5 Cess Pool</td> <td>10 Livestock pens</td> <td>15 Oil well/ Gas well</td> <td></td> </tr> </table>						1 Septic tank	6 Seepage pit	11 Fuel storage	16 Other (specify below)	2 Sewer lines	7 Pit privy	12 Fertilizer storage		3 Watertight sewer lines	8 Sewage lagoon	13 Insecticide storage		4 Lateral lines	9 Feedyard	14 Abandoned water well		5 Cess Pool	10 Livestock pens	15 Oil well/ Gas well													
1 Septic tank	6 Seepage pit	11 Fuel storage	16 Other (specify below)																																		
2 Sewer lines	7 Pit privy	12 Fertilizer storage																																			
3 Watertight sewer lines	8 Sewage lagoon	13 Insecticide storage																																			
4 Lateral lines	9 Feedyard	14 Abandoned water well																																			
5 Cess Pool	10 Livestock pens	15 Oil well/ Gas well																																			
Direction from well? _____ How many feet? _____																																					
<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th style="width:10%;">FROM</th> <th style="width:10%;">TO</th> <th style="width:10%;">CODE</th> <th style="width:70%;">PLUGGING MATERIALS</th> </tr> </thead> <tbody> <tr> <td>0</td> <td>49</td> <td></td> <td>Bentonite chips</td> </tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> <tr><td> </td><td> </td><td> </td><td> </td></tr> </tbody> </table>						FROM	TO	CODE	PLUGGING MATERIALS	0	49		Bentonite chips																								
FROM	TO	CODE	PLUGGING MATERIALS																																		
0	49		Bentonite chips																																		
<b>7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION:</b> This water well was plugged under my jurisdiction and was completed on (mo/day/yr) <u>9/13/16</u> and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No. <u>9/21/16</u> under the business name of <u>Bluestem Environmental Engineering, Inc.</u> This Water Well Record was completed on (mo/day/yr) _____ by (signature) <u>Nick Delt</u>																																					
<b>INSTRUCTIONS:</b> Please fill in blanks and circle the correct answers. Send three copies to Kansas Department of Health and Environment, Bureau of Water, 1000 S W Jackson St., Ste. 420, Topeka, Kansas 66620-0001. Telephone: 785-296-3585. Send one to Water Well Owner and retain one for your records.																																					